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PTO/SB/05 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
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UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	UW - Asbury
	First Inventor	Charles L. Asbury et al.
	Title	DEVICE AND METHODS FOR DETECTING SAMPLES IN
	Express Mail Label No.	EE866829948US

APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>	ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original, and a duplicate for fee processing)</i>	7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification [Total Pages 43] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none">- Descriptive title of the invention- Cross Reference to Related Applications- Statement Regarding Fed sponsored R & D- Reference to sequence listing, a table, or a computer program listing appendix- Background of the Invention- Brief Summary of the Invention- Brief Description of the Drawings <i>(if filed)</i>- Detailed Description- Claim(s)- Abstract of the Disclosure	a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total 6]	b. Specification Sequence Listing on: <ul style="list-style-type: none">i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); orii. <input type="checkbox"/> paper
5. Oath or Declaration [Total Pages 2] <ul style="list-style-type: none">a. <input type="checkbox"/> Newly executed (original or copy)b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) <i>(for continuation/divisional with Box 18 completed)</i><ul style="list-style-type: none">i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	c. <input type="checkbox"/> Statements verifying identity of above copies
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i>	
11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i>	
12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>	
16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/> Other:	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner _____ Group / Art Unit _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS					
<input type="checkbox"/> Customer Number or Bar Code Label or <input checked="" type="checkbox"/> Correspondence address below					
<small>(Insert Customer No. or Attach bar code label here)</small>					
Name	Delbet J. Barnard BARNARD & PAULY, P.S.				
Address	P.O. Box 58888				
City	Seattle	State	WA	Zip Code	98138-1888
Country	USA	Telephone	206-246-0568	Fax	206-243-4618

Name (Print/Type)	Delbert J. Barnard	Registration No. (Attorney/Agent)	20,515
Signature	<i>Delbert J. Barnard</i>	Date	May 1, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number	
Filing Date	May 1, 2001
First Named Inventor	Charles L. Asbury et al.
Examiner Name	
Group Art Unit	
Attorney Docket No.	UW - Asbury

TOTAL AMOUNT OF PAYMENT \$475.00

METHOD OF PAYMENT		FEE CALCULATION (continued)																																																																																																																																																																																					
<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:</p> <p>Deposit Account Number: 02-0915</p> <p>Deposit Account Name: Barnard & Pauly, P.S.</p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR §§ 1.16 and 1.17</p> <p><input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR § 1.27</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>		<p>3. 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SUBMITTED BY		Complete (if applicable)	
Name (Print/Type)	Delbert J. Barnard	Registration No. (Attorney/Agent)	20,515
Signature	<i>Delbert J. Barnard</i>	Telephone	206-246-0568
		Date	May 1, 2001

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